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18 8/1/03

PATENT APPLICATION

03500.015484.

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In re Application of:)	English of G	accepted
TAKASHI ENDO	;	Examiner: C. Sung	Cis
Application No.: 09/887,121	;	: Group Art Unit: 2878	150
Filed: June 25, 2001)		RECE!
For: RADIATION IMAGING SYSTEM	;) :	July 23, 2003	DEIVED 130 2003 1004 CENTER
Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450			R 2800

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

LETTER TRANSMITTING CORRECTED DRAWING

Sir:

Transmitted herewith is one (1) sheet of formal drawing to be substituted for the corresponding drawing sheet presently on file in the above-identified application.

The new Fig. 15 incorporates the change approved by the Examiner in the Office Action dated April 23, 2003.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

July 23, 2003
(Date of Deposit)

LEONARD P. DIANA (Reg. No. 29,296)
(Name of Attorney for Applicant)

July 23, 2003

Signature

July 23, 2003

Date of Signature

Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

Attorney for Applicant

Registration No.

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3801 Facsimile: (212) 218-2200

NY_MAIN 363547v1



In re Application of:

Docket No. 03500.015484.

TAKASHI ENDO

Application No.: 09/887,121

Filed: June 25, 2001

For: RADIATION IMAGING SYSTEM.

Examiner: C. Sung

Group Art Unit: 2878

Date: July 23, 2003

Mail Stop Non-Fee Amendment COMMISSIONER FOR PATENTS P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Amendement in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below

JUL 30 2003

FECHNOLOGY CENTER 2800

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 20	MINUS	** 20	= 0	x \$9 \$18	\$0
INDEP. CLAIMS	* 2	MINUS	***	= 0	x \$42 \$84	\$0
Fee for Multiple Dependent claims \$140°/\$280					\$0	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0	

^{*} If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

	°Verified Statement claiming small entity status is enclosed, if not filed previously.
	A check in the amount of \$ is enclosed.
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
	A check in the amount of \$ to cover the fee for amonth extension is enclosed.
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
X	Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.
	Respectfully submitted,
	Attorney for Applicant

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3801 Facsimile: (212) 218-2200

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